

Article - Health Occupations

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§14–5A–01.

- (a) In this subtitle the following words have the meanings indicated.
- (b) “Board” means the State Board of Physicians.
- (c) “Committee” means the Respiratory Care Professional Standards Committee established under § 14–5A–05 of this subtitle.
- (d) “License” means a license issued by the Board to practice respiratory care.
- (e) “Licensed respiratory care practitioner” means a respiratory care practitioner who is licensed by the Board to practice respiratory care.
- (f) “Licensee” means a licensed respiratory care practitioner.
- (g) “National certifying board” means the National Board for Respiratory Care or a certifying organization that has certification requirements equivalent to the National Board for Respiratory Care and that has been approved by the Board.
- (h) (1) “Practice respiratory care” means to evaluate, care for, and treat, including the diagnostic evaluation of, individuals who have deficiencies and abnormalities that affect the pulmonary system and associated aspects of the cardiopulmonary and other systems under the supervision of and in collaboration with a physician.
- (2) “Practice respiratory care” includes:
 - (i) Providing direct and indirect respiratory care services that are safe, aseptic, preventive, and restorative;
 - (ii) Practicing the principles, techniques, and theories derived from cardiopulmonary medicine;
 - (iii) Evaluating and treating individuals whose cardiopulmonary functions have been threatened or impaired by developmental defects, the aging process, physical injury, disease, or actual or anticipated dysfunction of the cardiopulmonary system;

(iv) Observing and monitoring physical signs and symptoms, general behavior, and general physical response to respiratory care procedures and determining if initiation, modification, or discontinuation of a treatment regimen is warranted;

(v) Transcribing and implementing written or oral orders regarding the practice of respiratory care;

(vi) Using evaluation techniques that include cardiopulmonary function assessments, gas exchange, the need and effectiveness of therapeutic modalities and procedures, and the assessment and evaluation of the need for extended care and home care procedures, therapy, and equipment; and

(vii) Applying the use of techniques, equipment, and procedures involved in the administration of respiratory care, including:

1. Except for general anesthesia, therapeutic and diagnostic gases;
2. Prescribed medication for inhalation or direct tracheal installation;
3. The administration of analgesic agents by subcutaneous injection or inhalation for the performance of respiratory care procedures;
4. Nonsurgical insertion, maintenance, and removal of artificial airways;
5. Advanced cardiopulmonary measures;
6. Cardiopulmonary rehabilitation;
7. Mechanical ventilation or physiological life support systems;
8. Collection of body fluids and blood samples for evaluation and analysis;
9. Insertion of diagnostic arterial access lines; and
10. Collection and analysis of exhaled respiratory gases.

(i) “Supervision” means the responsibility of a physician to exercise on–site or immediately available direction for a licensed respiratory care practitioner performing delegated medical acts.

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